



December 16, 2021

Web Announcement 2656

2022 Annual New Code Update

The Centers for Medicare & Medicaid Services (CMS) has provided the 2022 new codes to the Division of Health Care Financing and Policy (DHCFP). The new 2022 codes will be added to the Medicaid Management Information System (MMIS) by January 1, 2022.

For dates of service on or after January 1, 2022, when applicable, please use the appropriate new 2022 Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS) and American Dental Association (ADA) codes.

Effective January 1, 2022, claims with 2022 codes will suspend with error code 853 (HCPCS - Annual Update - Suspend Claims) until rates and policy are updated in MMIS. Codes that have earlier effective dates are also suspending with error code 853.

Additional web announcements will be posted when the rates and policy for the 2022 codes have been updated in MMIS, and when the suspended claims will be released for adjudication.

Please note: When claims are reprocessed or released for adjudication, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.